

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC		FEC IDENTIFICATION NUMBER ▼ C C00625285	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 05 / 2016</div> </div>	

Full Name of Payee ForAmerica		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2016	
Mailing Address PO Box 497		Amount 2500.00	
City Clifton	State VA	Zip Code 20124	Transaction ID : SE.4232
Purpose of Expenditure Social media advertising buy running 11/4 - 11/8		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TRUMP, DONALD J., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee ForAmerica		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 05 / 2016	
Mailing Address PO Box 497		Amount 28000.00	
City Clifton	State VA	Zip Code 20124	Transaction ID : SE.4234
Purpose of Expenditure Social media advertising buy for ads running 11/5 - 11/8 - estimate		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TRUMP, DONALD J., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	30500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Martin, Ed, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 12 / 08 / 2016

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
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Form/Schedule: F24A
Transaction ID :

This report has been amended to create a memo entry to permit accurate reoprting on the 30-Post General Report.

Form/Schedule:
Transaction ID: